# PRISON RAPE ELIMINATION ACT PANEL NOVEMBER 15, 2006

## TAMI VILES INVESTIGATIVE SERVICE UNIT: EVIDENCE OFFICER

#### **Testimony**

Hello, my name is Tami Viles. Thank you for allowing me to provide testimony on the subject of sexual violence in the California Department of Corrections and Rehabilitation Prison System. I have been a Correctional Officer at California State Prison Sacramento for seven and a half years of which I was a Facility Housing Officer for three years. Currently I am assigned to the Investigative Service Unit along with being the institutions Evidence Officer. My following opinions will be based on my experience within these two jobs:

### Question #1: What factors and environments are and are not conducive to deterrence of sexual assaults in prison?

The factors and environments conducive to deterrence of sexual assaults are as follows:

- Thorough screening of inmates for housing assignments;
- Correctional Officers and Medical Staff interaction with inmates on their routine rounds in housing units;
- Training for all staff to identify potential victims;
- The institutions operating policy; OP136, that keeps all victims confidential;
- Medical call slips that are available to all inmates;
- Institutional programs that allow inmates to have contact with a Supervisor or Mentor to report their victimization to;
- Professionalism of staff in handling the victim's complaint;
- Stricter accountability for the aggressor.

The factors and environments not conducive to deterrence of sexual assault are as follows:

- Cuts in staffing;
- Overcrowding;
- Retaliation by the aggressor;
- Blind spots and poor lighting in housing units as well as job assignment;
- Allowing effeminate male inmates to double cell;
- Allowing level four inmates to work in the Dining Hall.

#### **Question #2: Which system protocols and policies require examination?**

Protocols and policies that require examination:

- Housing and Classification;
- Work Assignments;
- Medical staff should be trained to perform rape exams at the institution eliminating transports to outside hospitals. This would reduce escape risks and loss of evidence:
- OP136, the institutions sexual assault policy;
- Educate inmates on the many avenues available to them for reporting rapes.

#### Questions #3: Which staff positions in such a system would be Key Witness?

The staff positions that would be Key Witnesses would be the following:

- Correctional Officers that have contact with inmates on a daily basis;
- Correctional Counselors who are available to inmates in their housing units;
- Medical Staff are on call to inmate's emergency needs 24 hours a day;
- Mental Health Staff are available to inmates.

### **Question #4: How to scrutinize the training of Correctional Officers and Medical Staff?**

We currently have extensive training on sexual assaults and PREA in our yearly Inservice Training. CDCR tracks sexual assaults through Incident Reports. The information from this tracking method can be used to focus on institutions that might need additional training for medical staff and/or Correctional Officers. The Sexual Assault Team should have more intensive training in investigative procedures, evidence collection, exam procedure for medical staff and counseling.

### Question #5: What are the likely barriers to reporting, accurately investigating, and deterring prison rape?

Barriers to reporting prison rape:

- Fear of future violence:
- Believability;
- He said/he said;
- Embarrassment.

Barriers to accurately investigating rape:

- Limited time due to staff workload;
- Delayed reporting from victims;
- Inmate's believability;

- Inmates distrust in the prison system;
- Training.

Barriers to deter prison rape:

- Funding;
- Staffing;
- Overcrowding;
- Lack of Video Cameras for monitoring and prevention.

This concludes my testimony. Does the panel have any questions? Thank you for the opportunity to provide testimony.